## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PTB-4750-27 In re Patent Application of Atty Dkt. APR 1 4 2009 C# M# C/A.U. 3735 MADAUS et al. Examiner: Karen Toth Serial No. 10/531,476 Date: April 14, 2009

**EXPEDITED HANDLING PROCEDURES** 

RESPONSE UNDER

Filed: April 15, 2005

Title:

METHOD AND DEVICE FOR CARRYING OUT A SIGNAL-PROCESSING VIEWING OF A MEASUREMENT SIGNAL THAT IS CORRELATED TO THE

RESPIRATORY ACTIVITY OF AN INDIVIDUAL

## Mail Stop AF

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

## RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

□ Correspondence Address Indication	on Form Attached.		
Fees are attached as calculated below:			
Total effective claims after amendment 38	minus highest number		
	2 x \$52.00	\$104.00 (1202)/\$0.00 (2202)	\$ 104.00
Independent claims after amendment 7	minus highest number		
previously paid for 6 (at least 3) =	1 x \$220.00	\$220.00 (1201)/\$0.00 (2201)	\$ 220.00
If proper multiple dependent claims now added for	or first time. (ignore improper	); add	
The proper manages dependent examine the manages and	, ,	\$390.00 (1203)/\$0.00 (2203)	\$
man (1) to the control of the contro	- data as as to sover the filing		

Petition is hereby made to extend the current due date so as to cover the filing date of this

paper and attachment(s)

One Month Extension \$130.00 (1251)/\$0.00 (2251)

Two Month Extensions \$490.00 (1252)/\$0.00 (2252) Three Month Extensions \$1110.00 (1253/\$0.00 (2253)

Four Month Extensions \$1730.00 (1254/\$0.00 (2254)

Five Month Extensions \$2350.00 (1255/\$0.00 (2255) \$ \$140.00 (1814)/\$0.00 (2814) \$ Terminal disclaimer enclosed, add

☐ Statement filed herewith Applicant claims "small entity" status.

Rule 56 Information Disclosure Statement Filing Fee

\$180.00 (1806) \$

0.00 0.00

Assignment Recording Fee Other:

\$40.00 (8021)

0.00

**TOTAL FEE \$** 

324.00

## CREDIT CARD PAYMENT FORM ATTACHED.

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

PTB/JR:lmi

NIXON & VANDERHYE P.C.

By Atty: Paul T. Bowen, Reg. No. 38,009

Signature: